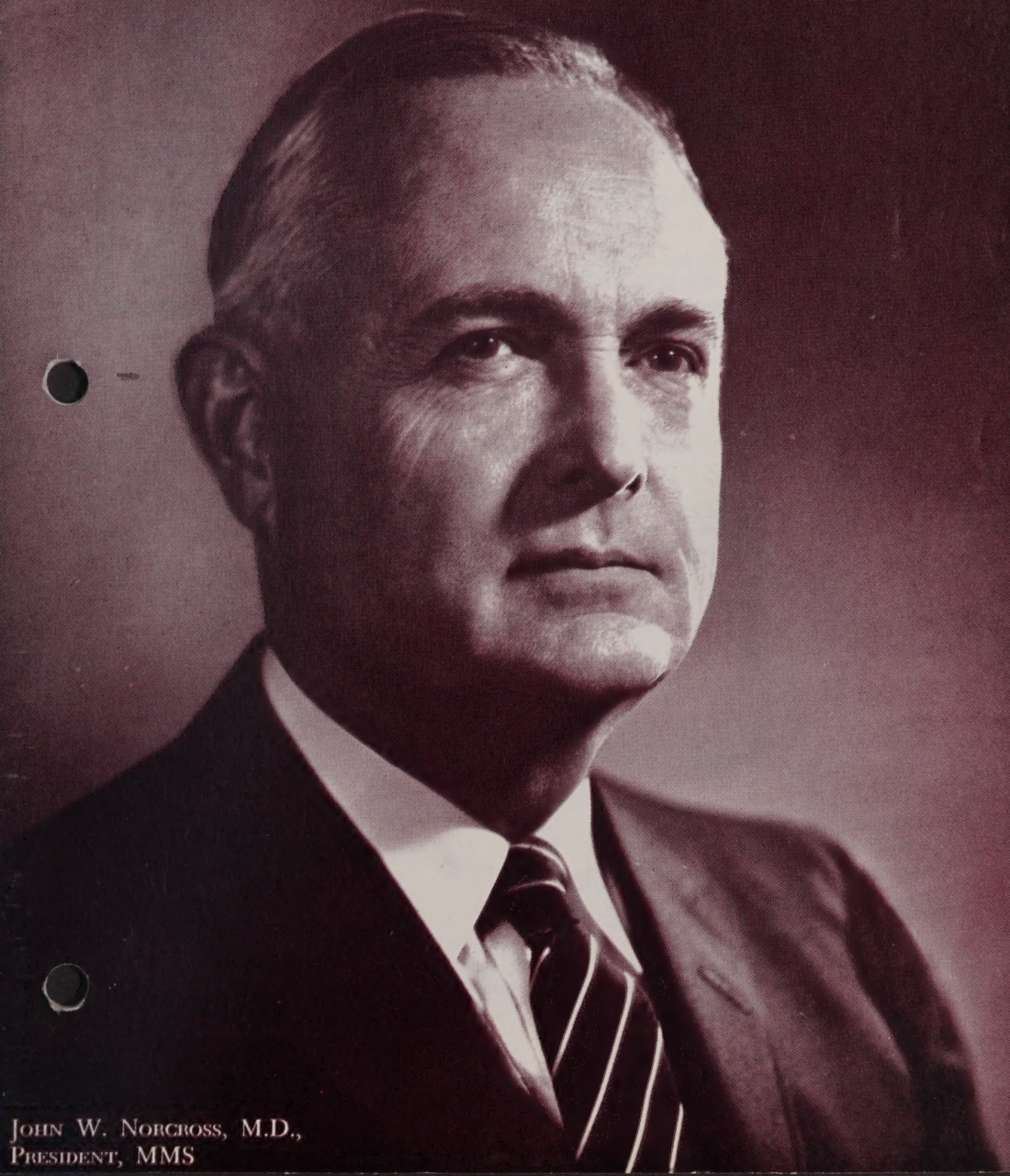
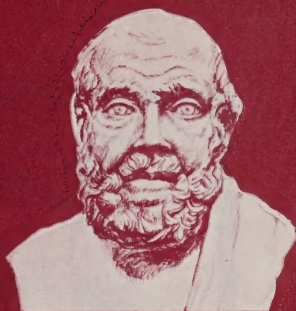


The Hampden Hippocrat

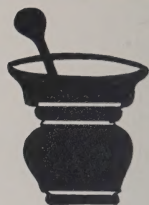
JUNE, 1968



JOHN W. NORCROSS, M.D.,
PRESIDENT, MMS



FE&B businessmen
keep busy minding
other people's business!



FE&B



FIELD, EDDY and BULKLEY
Insurance

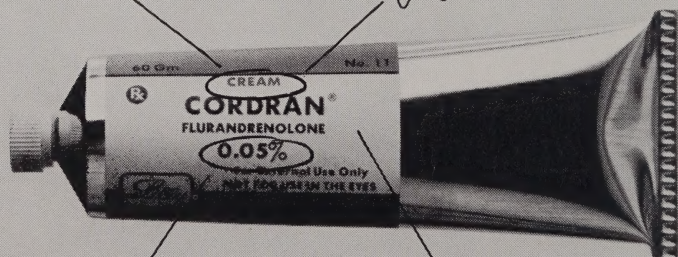
1200 Main Street, Springfield Telephone 733-3131

L. C. Goldthwaite, Donald Hartford, Henry Hanmer, Kenneth Goddard, Robert Hussey



Ointment, too

Don't forget the lotion



or 0.025%

With neomycin sulfate, also

800210

Additional information available to physicians upon request.
Eli Lilly and Company, Indianapolis, Indiana 46206.

Lilly



HAMPDEN DISTRICT MEDICAL SOCIETY

1414 STATE STREET

SPRINGFIELD, MASS. 01109

Telephone: 736-0661

Vivian M. Purdy, *Executive Secretary*

OFFICERS

WAYNE C. BARNES, M.D.	<i>President</i>
WALTER S. MOZDEN, M. D.	<i>Vice President and President-Elect</i>
BRUCE B. STOLER, M.D.	<i>Secretary</i>
PAUL T. MOORE, M.D.	<i>Treasurer</i>
MAURICE J. BOVIN, M.D.	<i>Assistant Secretary</i>

EXECUTIVE AND GRIEVANCE COMMITTEES

WAYNE C. BARNES, M.D.	<i>ex-officio</i>	JOSEPH M. BAKER, M.D.
WALTER S. MOZDEN, M.D.	<i>ex-officio</i>	PAUL T. MOORE, M.D.
BRUCE B. STOLER, M.D.	<i>ex-officio</i>	LESTER G. SUZOR, M.D.
EMANUEL WIEDMAN, M.D.	1969	EUGENE W. BEAUCHAMP, JR., M.D.
HARRY ANTON, M.D.	1970	GARY DEN. HOUGH, III, M.D.
JOSEPH R. KELLY, M.D.	1971	JOHN P. SULLIVAN, M.D.

CHAIRMEN OF COMMITTEES

HOWARD N. SIMPSON, M.D.	<i>Auditing</i>
WALTER D. CARVER, M.D.	<i>Blue Shield District Professional Service</i>
HARRY N. MEMERY, M.D.	<i>By-laws</i>
MALCOLM S. ALLAN, M.D.	<i>Censors</i>
ALFONSO A. PALERMO, M.D.	<i>Commissioner of Trials</i>
WILLIAM J. CUMMINGS, M.D.	<i>Disaster Medical Care</i>
HAROLD B. WILLIAMS, M.D.	<i>Emergency Medical Service</i>
JOSEPH R. KELLY, M.D.	<i>Insurance, Labor Relations, and Industrial Accidents</i>
KAREL J. SUSAT, M.D.	<i>Legislative</i>
JOHN J. BURKE, M.D.	<i>Malpractice and Medico-Legal Affairs</i>
LEROY J. KENDREW, M.D.	<i>Medico-Religious</i>
H. BERNARD TILLMAN, M.D.	<i>Members' Insurance Programs</i>
H. H. SHUMAN, M.D.	<i>Mental Health</i>
JOHN J. BURKE, M.D.	<i>Nominating</i>
ROBERT A. SEARS, M.D.	<i>Public Health</i>
LESTER G. SUZOR, M.D.	<i>Public Relations</i>
WAYNE C. BARNES, M.D. and WALTER S. MOZDEN, M.D.	<i>Representatives to Community Council</i>
B. LINCOLN WALES, M.D.	<i>Scholarship</i>
WILLIAM BEACHMAN, M.D.	<i>Tax-Supported Medical Care</i>
CARLO Q. MONTORI, M.D.	<i>Woman's Auxiliary</i>

COUNCILORS TO THE MMS

JOHN C. AYRES, M.D.	<i>Executive Councilor</i>
WALTER J. J. NERO, M.D.	<i>Alternate to the Executive Councilor</i>
THEODORE R. MINER, M.D.	<i>Nominating Councilor</i>
ELMER F. FRANSEEN, M.D.	<i>Alternate to the Nominating Councilor</i>
MALCOLM S. ALLAN, M.D.	ROBERT N. LAMARCHE, M.D.
BERNARD BLOOM, M.D.	FRANK G. MILLS, M.D.
MAURICE J. BOVIN, M.D.	RICHARD V. PAUL, M.D.
JOHN F. BRENNAN, M.D.	TERRY D. RYAN, M.D.
JOSEPH M. CORCORAN, M.D.	HOWARD N. SIMPSON, M.D.
BERNARD N. GILCHRIST, M.D.	KAREL J. SUSAT, M.D.
DONALD R. HAYES, M.D.	LESTER G. SUZOR, M.D.
JOSEPH R. KELLY, M.D.	H. BERNARD TILLMAN, M.D.



A bulletin for
The Hampden District of
The Massachusetts Medical Society

Founded in 1942 by Drs. Edward P. Bagge
and William A. R. Chapin, and published
monthly except July and August.

BOARD OF EDITORS

Edward P. Bagge, M.D.

Editor-Emeritus

Max Millman, M.D.

Editor-Emeritus

John C. Ayres, M.D.

Editor-in-Chief

(1414 State Street, Springfield, Mass. 01109)

H. Bernard Tillman, M.D.

Assistant Editor

ASSOCIATE EDITORS

Eugene G. Boss, Jr., M.D.

Olive A. Cooper, M.D.

Donald R. Hayes, M.D.

Setrag A. Zacarian, M.D.

Joseph B. Greenspan, M.D.

Secretary and Business Manager

(91 School Street, Springfield, Mass., 01105)

Mrs. Arthur Willard

Advertising Director

(62 Irvington Street, Springfield, Mass., 01108, Tel. 733-5336)

Frank F. Hurley, M.D.

Frank G. Mills, M.D.

Roland F. Stebbins, M.D.

A MESSAGE TO HAMPDEN DISTRICT MEDICAL SOCIETY

from John W. Norcross, M.D.
President, Massachusetts Medical Society

The Massachusetts Medical Society has just completed a year of relative turbulence and one in which certain shortcomings of our by-laws in regard to the statutes of the Commonwealth have been brought to light. The passage of amendments to the by-laws at the Annual Meeting just concluded have corrected these matters.

More importantly, however, the Society through its Committee on Long-Range Planning is giving careful consideration to questions concerning our future. Among other things, thought is being given to the wisdom of amending the Acts of Incorporation through legislative action. In this regard a questionnaire will be sent shortly to every member of the Society in an earnest effort to obtain the opinion of each in these important matters. A high percentage of return is urged and expected. These answers will serve as guidelines to the Society's committees and will be important in laying the ground rules for many years to come.

My illustrious predecessor, Dr. Nickerson, has initiated during this past year meetings of the officers of the state society with the officers of the twenty-one districts to discuss our problems and to disseminate information concerning matters of importance. These have been very successful and will be continued. I urge your officers to make every effort to attend and to make this information available to each of you at your district meetings.

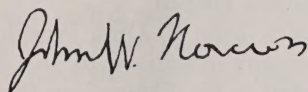
Your state society will continue in its efforts to obtain usual and customary fees for Medicaid in its negotiations with the state Rate-Setting Commission

when the latter becomes operative. It is our belief that the fees of physicians are not rising at an excessive rate and are pleased with the cooperation offered by most physicians in this regard.

There continues to be much activity at all levels of government in planning for the future health of our citizens. Since most of the committees, councils, advisory boards, and so forth, are set up by law to be composed of a majority of members who represent consumers and since all the providers of service are combined to make up the minority, the physicians' part in such planning organizations is of necessity much smaller than we would choose. It is unlikely that this will be changed. Therefore, it is particularly important that we utilize every chance to take part in these plans for the future—that no opportunity be overlooked—that no place go by default. Your district medical society should keep abreast of these plans. It is also essential, I believe, that we as physicians cooperate cheerfully whenever we can in order that we leave no impression of obstructionism and so that we will build an image such that our voices will be heard when we speak out on important matters that are of vital concern to us.

Since it is an election year, 1968 is of particular importance to the medical profession as a whole and the physicians of Massachusetts are no exception. I ask your help in making known our gratitude to those members of the legislature who represent you in Hampden District and who have demonstrated their friendship by their voting record. They will appreciate any help that you can give them in their approaching campaigns. In this regard your officers will be apprised shortly of the voting record of your legislators.

We are appreciative of the help that the Hampden District Medical Society has given the state society in the past and urge your continued cooperation. I shall be pleased to hear from any of your members or from your officers at any time and assure you that your ideas will be given thoughtful consideration.



John W. Norcross, M.D.
President



THE MEDICAL CREDITS DIVISION

Administered by an Operating Council comprised of Physicians, Dentists and Hospital representatives who are elected annually. Furnishes educational and professional assistance to its members in safe credit and collection procedures. Provides pre-collection aids and offers where required, an ethical, dignified, and efficient collection service.

**For further information please telephone 736-4511, Ext. 46,
Medical Credits Division, Credit Bureau, Inc. of Greater Springfield.**



MMS COUNCIL MEETING HIGHLIGHTS

The Annual Meeting of the Council of the Massachusetts Medical Society was held in Boston on May 20, 1968. Representing Hampden District were the following councilors: Drs. John C. Ayres, Elmer F. Franseen, Donald R. Hayes, Alan S. Johnson, Joseph R. Kelly, Robert N. LaMarche, Frank G. Mills, Theodore T. Miner, Walter J. J. Nero, Richard V. Paul, Terry D. Ryan, Howard N. Simpson, Karel J. Susat, and H. Bernard Tillman. The meeting was called to order by the President, Dr. Donald A. Nickerson, at 10:15 A.M. Dr. Nickerson ruled that "ex-officio" members would have no vote but would have the right to speak. The minutes of the previous meeting, as published, were approved. A committee to evaluate the Post-Graduate Medical Institute was appointed, and two appointments were made to fill vacancies on the Committee on Occupational Health.

Mrs. John F. Dias, President of the Woman's Auxiliary to the MMS, reported to the Council on the activities of that organization. She reported on the development of a film library, the formulation of a health careers directory for school counsellors and students, the awarding of scholarships to students entering various health careers, and the donation of funds to the AMA Educational and Research Foundation. She concluded with a plea to physicians to urge their wives to join the Auxiliary.

Dr. Max Caplan brought greetings from the Connecticut Medical Society. He also indicated that Connecticut would support Dr. Donald Hayes for election to the Board of Trustees of the AMA, and furthermore, Connecti-

cut would support the resolution which is to be presented by the MMS to the AMA.

Dr. James S. Jessup of New Hampshire, President of the Council of the New England State Medical Societies, also addressed the Council briefly. Representatives from the other New England states were due to arrive later.

Mr. David Gold, President of the Boston University Chapter of the Student AMA reported on the activities of his organization. The previous custom of sending one student to Europe for special studies has been abandoned in favor of helping the poor in this area.

Under suspension of the rules, a resolution was presented by Dr. Bradley E. Copeland to correct misleading and false statements by the Department of Health, Education and Welfare to Congress (1967) in "A Report on Laboratory Performance and Methods for Improvements." The complete list of corrections which are fully documented has been published in the Congressional Record for December 14, 1967. For example, a charge that 50,000 to 250,000 mismatched transfusions a year is based on 1938 to 1945 figures before 90% of current blood bank knowledge was discovered. Other similar misleading statements were equally glaring, based on out-dated statistics or limited geographic area. The following resolution was carried "that the information and evidence that this group has accumulated be referred to the House of Delegates of the AMA with the request that they consider it and take appropriate action." Furthermore, it

was resolved "that the AMA bring strong pressure to bear on the Department of HEW to correct its erroneous statement in this regard."

The Treasurer's report was read and accepted. A number of other purely informational committee reports were also presented.

The Members' Insurance Committee recommended that "the Council vote its approval of payment in the future on a usual and customary fee basis to a physician who has rendered his services to another physician or his family covered under any plan of the Massachusetts Physicians Group, Blue Cross-Blue Shield program for physicians and their families." (See *Hippocrat*, May, 1968, page 20). This recommendation was approved. It was furthermore, voted to transmit this action of the Council to the Blue Shield representatives in time to negotiate a new contract which becomes effective December 1, 1968.

The Committee on National and State Legislation urged defeat of H4395 requiring use of generic names.

The Committee on Nominations presented the slate of officers for the coming year (See page 8).

The Committee on Professional Liability recommended repeal of the Medical Defense Act (see page 20). The MMS has in the past defended malpractice suits but never paid judgments. The Committee felt that everyone should carry professional liability insurance, and that the Medical Defense Act was no longer needed. This recommendation was approved.

The Committee on Disaster Medical Care concurred in the recommendation of the Massachusetts Dental Society that dentists should be included in disaster planning programs.

The Committee on Prevailing Fees is attempting to develop a state wide schedule of a range of prevailing fees, coordinated with a cost of living formula, to be used as a basis of nego-

tiation with third party payees for medical services. Meanwhile, a resolution of Dr. Parker, passed June 28, 1967, and providing for such a schedule within one year, was rescinded as impossible to carry out.

Future directors of Blue Shield were approved. Informational reports were presented by the Trustees of the Boston Medical Library and Delegates of the Council of the New England State Medical Societies.

Fifty year badges were presented to 15 members of whom 3 were from Hampden District: Dr. James Z. Naurison, Dr. Salvatore Sannella, and Dr. Honoria K. Shine.

Dr. Jerome A. Whitney of Hampden, Chairman of the Committee on Mental Health, presented the report of his committee. The resolution presented was amended to read "that the Council of the MMS affirms that psychiatry is a branch of the practice of medicine, and opposes any legislation or other act which would deprive the citizens of this Commonwealth of their protection against the offering or provision of psychiatric treatment by any unqualified individuals." The Council also called attention to a previous resolution voted October 3, 1962, which affirmed the principle that the care and treatment of the mentally ill patients be under the direct control and supervisions of physicians.

The Committee on Long Range Planning recommended that distribution of a questionnaire to members of the Society to seek suggestions concerning the future course of the Society. This was approved.

The suggestion that a complete reorganization of the Society as a corporation was defeated. The Committee, after studying the original statutes drawn in 1781 along with a number of amendments adopted subsequently over many years expressed the desire to compress all these statutes and amendments to a single document.

The Council approved in principle the concept that the statutes be amended, and that the proposed revisions of the statutes and amendments be circulated to all Fellows immediately. Furthermore, an ad hoc committee of the Council is to sit as a reference committee to bring in its version of the statute and proposed revisions prior to the October Council meeting. If necessary, a special meeting of the Fellows will be called in November to consider the statutes and proposed revisions.

The Committee on Utilization Procedures recommended that the MMS approve the use of Blue Cross Data Service as an available supplement to aid Utilization Committees and members in evaluating effective use of medical facilities. This was so voted.

Under new business, a resolution

was presented by Norfolk South District in relation to the discontinuance of the payment by Blue Shield of 15% of the fee for provision of after care by other than the attending surgeon when the latter is also in attendance. This was referred to the Committee on Medical Services.

The Council approved the recommendation of the Executive Committee that the next meeting of the MMS be held at the Statler Hilton in Boston, May 27, 28, and 29, 1968.

At this point Dr. Jacob H. Fine, President-Elect, was introduced. Dr. Nickerson then turned the gavel over to the new president, Dr. John W. Norcross. The new committee appointments were approved by the Council and the Council adjourned at 3:10 P.M.

Tillman



OFFICERS OF THE MASSACHUSETTS MEDICAL SOCIETY 1968-1969

<i>President</i>	JOHN W. NORCROSS, CHARLES RIVER
<i>President-Elect</i>	JACOB H. FINE, ESSEX SOUTH
<i>Vice-President</i>	H. THOMAS BALLANTINE, JR., SUFFOLK
<i>Secretary</i>	THOMAS GEPHART, SUFFOLK
<i>Treasurer</i>	CHARLES G. SHEDD, SUFFOLK
<i>Assistant Treasurer</i>	ELIOT HUBBARD, JR., MIDDLESEX SOUTH
<i>Orator</i>	FRANZ J. INGELFINGER, MIDDLESEX SOUTH

DELEGATES TO THE AMERICAN MEDICAL ASSOCIATION

January 1, 1969 through December 31, 1970

FRANK D. EDDY, BERKSHIRE

CLAUDE E. WELCH, MIDDLESEX SOUTH

ALTERNATE DELEGATES TO THE AMERICAN MEDICAL ASSOCIATION

January 1, 1969 through December 31, 1970

LEWIS S. PILCHER, CHARLES RIVER

J. ROBERT BROWNING, PLYMOUTH



***"Now that your acne is clearing up nicely,
it might be a good idea if you started losing some weight."***

Get them while they're easily reversible.

Obesity doesn't happen suddenly. This insidious process has its beginning—and the chances of reversing it are better—during the *first 10 to 15 pounds of weight gain*. When a new dietary pattern must be established, consider the adjunctive use of **BAMADEX SEQUELS**. Combining the proven *anorexigenic* action of d-amphetamine with the *tranquilizing* effect of meprobamate, **BAMADEX SEQUELS** controls appetite throughout the day, usually with a single capsule daily.

Contraindications: Dextro-amphetamine sulfate: In hyperexcitability and in agitated prepsychotic states. Previous allergic or idiosyncratic reactions to meprobamate.

Precautions: Use with caution in patients hypersensitive to sympathomimetic compounds, who have coronary or cardiovascular disease, or are severely hypertensive.

Dextro-amphetamine sulfate: Excessive use by unstable individuals may result in psychological dependence.

Meprobamate: Careful supervision of dose and amounts prescribed is advised, especially for patients with known propensity for taking excessive quantities of drugs. Excessive and prolonged use in susceptible persons, e.g. alcoholics, former addicts, and other severe psychoneurotics, has been reported to result in dependence on the drug. Where excessive dosage has continued for weeks or months, reduce dosage gradually. Sudden withdrawal may precipitate recurrence of preexisting symptoms such as anxiety, anorexia, or insomnia; or withdrawal reactions such as vomiting, ataxia, tremors, muscle twitching and, rarely, epileptiform seizures. Should meprobamate cause drowsiness or visual disturbances, reduce dosage and avoid operation of motor vehicles, machinery or other activity requiring alertness. Effects of excessive alcohol consumption may be increased by meprobamate. Appropriate caution is recommended with patients prone to excessive drinking. In patients prone to both petit and grand mal epilepsy meprobamate may precipitate grand mal attacks. Prescribe cautiously and in small quantities to patients

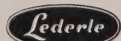
with suicidal tendencies.

Side Effects: Overstimulation of the central nervous system, jitteriness and insomnia or drowsiness. Dextro-amphetamine sulfate: Insomnia, excitability, and increased motor activity are common and ordinarily mild side effects. Confusion, anxiety, aggressiveness, increased libido, and hallucinations have also been observed, especially in mentally ill patients. Rebound fatigue and depression may follow central stimulation. Other effects may include dry mouth, anorexia, nausea, vomiting, diarrhea, and increased cardiovascular reactivity.

Meprobamate: Drowsiness may occur and can be associated with ataxia; the symptom can usually be controlled by decreasing the dose, or by concomitant administration of central stimulants. Allergic or idiosyncratic reactions: maculopapular rash, acute nonthrombocytopenic purpura with petechiae, ecchymoses, peripheral edema and fever, transient leukopenia. A case of fatal bullous dermatitis, following administration of meprobamate and prednisolone, has been reported. Hypersensitivity has produced fever, fainting spells, angioneurotic edema, bronchial spasms, hypotensive crises (1 fatal case), anuria, stomatitis, proctitis (1 case), anaphylaxis, agranulocytosis and thrombocytopenic purpura, and a fatal instance of aplastic anemia, but only when other drugs known to elicit these conditions were given concomitantly. Fast EEG activity, usually after excessive dosage. Impairment of visual accommodation. Massive overdosage may produce drowsiness, lethargy, stupor, ataxia, coma, shock, vasomotor and respiratory collapse.

Bamadex[®] Sequels[®]

Dextro-amphetamine sulfate (15 mg.) Sustained Release Capsules
with Meprobamate (300 mg.)

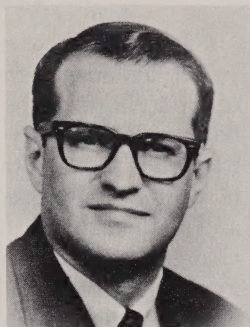


LEDERLE LABORATORIES

A Division of American Cyanamid Company
Pearl River, New York

WELCOME NEW MEMBERS . . .

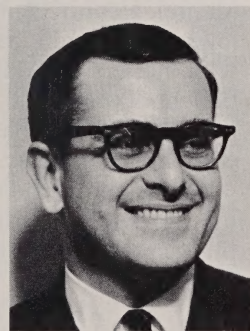
William M. Cloud, M.D. Office: 130 Maple St., Springfield, Mass. Born: Springfield, Missouri; March 23, 1934. Medical School: Northwestern University, 1959. Internship: Madigan General Hospital, Tacoma, Washington. Residency: Letterman General Hospital, San Francisco, Calif. Specialty: Radiology.



Gerald W. N. LaPierre, M.D. Office: 780 Chestnut St., Springfield, Mass. Born: Boston, Mass.; Sept. 9, 1937. Medical School: Boston University, 1963. Internship: Beverly Hospital. Residency: Hartford Hospital. Specialty: Radiology.



Jerald M. Rosenbaum, M.D. Office: 759 Chestnut St., Springfield, Mass. Born: Newark, N. J. Medical School: Jefferson Medical College, Philadelphia, Pa. 1962. Internship: USPHS Hospital, San Francisco, Calif. Residency: State University Hospital, Syracuse, N.Y. Specialty: Pathology.



Frederick A. Flatow, Jr., M.D. Office: 130 Maple St., Springfield, Mass. Born: Meriden, Conn.; March 2, 1934. Medical School: Cornell University, New York, 1960. Internship: St. Luke's, New York. Residency: St. Luke's, New York. Specialty: Internal Medicine, Hematology, Oncology.

BYLAW CHANGES AT THE MMS ANNUAL MEETING

The agenda of the annual meeting of the Fellows of the MMS, which was held on Wednesday afternoon of May 22, 1968, at the Statler Hilton Hotel in Boston progressed as per tradition and with dispatch until the proposed changes to the bylaws were presented. Prior to consideration of these bylaw changes, the Fellows were reminded that in accordance with the opinion of the legal counsel to the MMS relative to conformance with the enabling statutes, *all* proposed bylaw changes presented to the Council during the past year were included in the notice and call to the Annual Meeting along with the recommendations of the Council in regard thereto.

COUNCIL APPROVED

The Fellows first considered those bylaw changes which the Council recommended approval of. The first two amendments pertaining to establishment of a standing Committee on Mental Health composed of 12 Fellows who would concern themselves with matters pertaining to the prevention and treatment of mental illness and mental retardation were passed without controversy.

The tempo of the discussions picked up as bylaw changes pertaining to the composition of the Council, man-

ner of amending bylaws, and eligibility to hold office were considered. The first bylaw change as approved by the Council warmed up the pace by proposing that "the Council shall consist of councilors elected by the district societies." The Fellows approved same after some brief exchanges of opinion. The next bylaw change moved forward to a vibrant but orderly crescendo as the so-called "Holland resolution" came up for discussion. This bylaw change proposed that in addition to the usual quota of one for every 25 active and senior fellows and a majority fraction thereof with no less than 6 councilors, each district *could* elect to the Council in addition those of its fellows who in the past had been considered "ex-officio" members of the Council (district society presidents and secretaries, chairmen of MMS standing committees, past presidents of MMS and AMA, MMS officers, president of the AMA, editor of the NEJM. Mass. Commissioners of Public and Mental Health, and the president and executive director of the Mass. Medical Service). The following is a breakdown on the possible composition of the Council for the coming year on the basis of this proposed bylaw change.

NUMBER OF INDIVIDUALS IN VARIOUS CATEGORIES

Elected Councilors per Quota	304
District Officers	42
Chairmen of Standing Committees	15*
Past Presidents — MMS, AMA	16*
State Society Officers	5
Other "ex-officio"	5

Total	384
-------	-----

(*Two past presidents and one district president are also chairmen of standing committees)

NUMBER BY DISTRICTS FOR THE CURRENT YEAR

District	Number of Members	Quota Elected Councilors	"Ex-Officio" Officers	Others
Barnstable	123	6	2	none
Berkshire	180	7	2	1
Bristol North	114	6	2	none
Bristol South	265	11	2	1
Charles River	719	29	2	4
Essex North	237	9	2	2
Essex South	434	17	2	4
Franklin	59	6	2	1
Hampden	511	20	2	2
Hampshire	108	6	2	none
Middlesex Central	95	6	2	1
Middlesex East	223	9	2	1
Middlesex North	158	6	2	none
Middlesex South	803	32	2	6
Middlesex West	216	9	2	none
Norfolk	1142	46	2	5
Norfolk South	261	10	2	none
Plymouth	218	9	2	2
Suffolk	865	35	2	6
Worcester	480	19	2	1
Worcester North	130	6	2	none
		304	42	37

Opposition to this bylaw centered on the theme of "one man, one vote" as recently rendered by the U.S. Supreme Court in a decision pertaining to representative government. Dr. Donald S. Ellis of Middlesex East District, moreover, proclaimed that he had legal opinion to the effect that this proposed bylaw change was illegal. Dr. Knowles B. Lawrence, Chairman of the Committee on By-laws retorted that the MMS legal counsel opined that same was legal and proper. It was emphasized that the amendment was only permissive in allowing the said elections. It also was pointed out that these so-called "ex-officio" councilors were a repository of special knowledge and experience proffering much in the way of wisdom to the deliberations and decisions of the Council. After con-

siderable give and take, the proposed bylaw change was carried by a vote of 213 in favor and 153 in opposition.

The next three amendments as previously approved by the Council were also approved by the Fellows. One of same allowed that "Councilors only shall be eligible to be elected to the office of president, president-elect, and vice president." The other two were aimed at preventing so-called "pocket vetos" of proposed bylaw changes.

COUNCIL DISAPPROVED

The Council's disapproval of the bylaw change purporting to establish a Committee on Finance composed of the treasurers of the district societies was upheld by the Fellows.

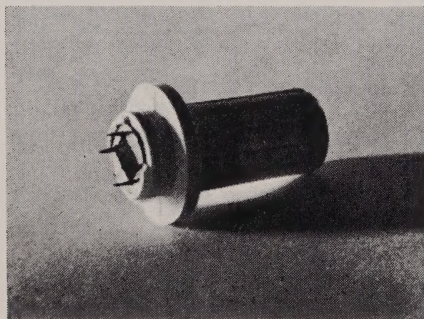
Before considering the proposed bylaw change relative to the Fellows

approving at the annual or a special meeting Council actions on matters considered "to constitute official policy of the Society," two other proposed bylaw changes were considered. The latter dealt with the Council's legislative powers, particularly as same relate to "official policy of the Society." The Council had previously voted to refer these latter bylaw changes to the Special Committee to Review the Bylaws which is working in conjunction with the Committee on Long Range Planning, and the Fellows upheld the Council's recommendations. Thereupon, the bylaw change requiring approval of Council actions on matters constituting "official policy of the Society" by the Fellows at an annual meeting was defeated.

Ayres

To fight TB- find it first!

Make tuberculin testing routine
with every physical examination.



TUBERCULIN, TINE TEST

(Rosenthal)

Side effects are possible but rare: vesiculation, ulceration, or necrosis at test site. Contraindications: none, but use with caution in active tuberculosis. Available in 5's and 25's.



330-8/6135

HAMPDENITES APPOINTED

The following members of Hampden District have been appointed to serve on committees and boards of the M.M.S. for 1968-1969.

STANDING COMMITTEES:

BENEVOLENCE

DR. AFONSO A. PALERMO

MEDICAL CHARGES REVIEW

DR. ALLEN S. JOHNSON

(CHAIRMAN)

DR. HOWARD N. SIMPSON

PUBLIC HEALTH AND PROBLEMS RELATING TO INDIVIDUAL DISEASES

DR. HYMAN H. SHUMAN

(CHAIRMAN)

DR. JOHN C. AYRES

SPECIAL COMMITTEES:

BLOOD BANKS

DR. JOHN P. SULLIVAN

BYLAWS, SPECIAL COMMITTEE TO REVIEW

DR. THEODORE R. MINER

LONG RANGE PLANNING

DR. ROBERT A. SEARS

MATERNAL WELFARE

DR. KENNETH W. SINISH

SUBCOMMITTEE ON PERINATAL WELFARE

DR. JAMES W. MORGAN

MEDICINE AND RELIGION

DR. GARY DEN. HOUGH, III

(CHAIRMAN)

SCHOOL HEALTH

DR. NORMAN A. POKORNY

BOARDS

ADVISORY BOARD

DR. ALLEN S. JOHNSON

For Information or Reservations for
your Business or Pleasure trip contact:

**WEIDNER TRAVEL BUREAU,
Inc.**

**83 State Street — Springfield, Mass.
Telephone 781-0550**



...curb the urge to eat excessively with
ESKATROL® SPANSULE® CAPSULES

Trademark

brand of sustained release capsules

Each capsule contains Dexedrine® (brand of dextroamphetamine sulfate) 15 mg.,
 and Compazine® (brand of prochlorperazine) 7.5 mg., as the maleate.

Especially for patients who react to emotional stress
 by overeating

Before prescribing, see complete information in SK&F
 literature or *PDR*. The following is a precautionary
 statement.

Contraindications: Hyperexcitability, undue restlessness
 or anxiety; hyperthyroidism; lactating (nursing)
 mothers; patients taking MAO inhibitors.

Precautions: Use in pregnant patients only when
 deemed essential for patient welfare. Phenothiazines may
 potentiate central nervous system depressants and
 organic phosphate insecticides. Use cautiously in hyper-
 tension and coronary artery disease. Psychological
 dependence may result from excessive amphetamine
 use. In such cases, withdrawal of the medication
 is recommended.

Adverse Reactions (reported or considered possible

with the components of 'Eskatrol'): *Dextroamphetamine*—
 Overstimulation, restlessness, insomnia, gastrointes-
 tinal disturbances, diarrhea, palpitation, tachycardia,
 elevation of blood pressure, tremor, nervousness, sweat-
 ing, impotence and headache. *Prochlorperazine*—Seda-
 tion, dizziness, hypotension, tachycardia, dry mouth,
 skin rash, tinnitus, vertigo, nasal congestion, miosis,
 lethargy, cholestatic jaundice, leukopenia, agranulocy-
 tosis, neuromuscular (extrapyramidal) reactions (motor
 restlessness, dystonias, pseudo-parkinsonism), convul-
 sions, catatonic-like reactions, reversal of epinephrine
 effects. For a comprehensive presentation of 'Eskatrol'
 prescribing information, including adverse effects re-
 ported with phenothiazines, see SK&F literature or *PDR*.

How Supplied: Bottles of 50 capsules.

Smith Kline & French Laboratories



THE MISSING

The above title has nothing to do with apes, anthropology or the evolution of Homo sapiens.

Rather, it refers to a solitary, definitive link of communication missing today between our Executive Councilor and his fellow members of the District Society. Since a chain is as strong as its weakest link, it follows that measures should be taken to correct the situation as soon as feasible and practicable.

The fault lies not with the Executive Councilor but with our existing parliamentary structure which fails to provide him with an opportunity to report on his various functions and activities.

What are some of these activities? First, he presides at the pre-council

meetings, at which the "Circular of Advance Information" is considered in detail. As a member of the Executive Committee of the MMS he attends all of its regular and special meetings. As a Councilor he attends all Council meetings. And finally, as a voting member of the Blue Cross and Blue Shield Corporations as well as of the Post Graduate Medical Institute, he participates in all their meetings and deliberations.

We see, then, that our Executive Councilor is a very busy man, indeed. To say that as a consequence he is the best informed and most knowledgeable member of our District Society, would be putting it mildly. But what good is all his wealth of information if the rest of us are denied the privi-

Landen-True

10 HARRISON AVENUE — SPRINGFIELD

TEL. 734-5658

"Your Jeweler for More Than One Hundred Years"

T. P. SAMPSON CO.

Funeral Directors

**Member of The Golden Rule
SPRINGFIELD, MASS.**

**FINANCIAL
MANAGEMENT INSTITUTE
99 Amostown Rd., W. Springfield
736-2584**

Modern Electronic Billing & Related
Business Services for Medical Men.

age of sharing it with him?

It is understandable, therefore, that a few short years ago our By-laws Committee introduced an amendment which would have made The Executive Councilor an ex-officio member of our own Executive Committee. The amendment, for one reason or another, was then defeated by the membership. Events since then, however, have further intensified the need for such reorganization. It is sincerely hoped, therefore, that if and when a similar amendment is proposed, our District Society will receive it more favorably than in the past.

In the meantime it would seem advisable to contrive some temporary

means of remedying the problem. It has been suggested that a local council meeting (similar to the pre-council meeting) be held following each MMS Executive Committee meeting. A more practical suggestion is to invite our Executive Councilor to report regularly to the membership (or at least to our Executive Committee) on all meetings he attends in Boston. No one wants to encumber our already overburdened Executive Councilor with yet another chore or committee job; nevertheless, ways must be found to complete more meaningfully the chain of communication between our Executive Councilor and the HDMS.

Millman

STORROWTON TAVERN



On the Village Green
Eastern States Exposition Park
West Springfield, Massachusetts
Bill Kavanagh, Innkeeper

* * *



* * *

PETER PAN TOURS
MOTORCOACH TOURS
TO
ALL AMERICA

139 BRIDGE ST.
SPRINGFIELD, MASS.
781-3343

Highpoint Pool and Tennis Club

450 Memorial Drive
Chicopee, Massachusetts
Tel.: 592-7722
Pool and Tennis Club Memberships
now being accepted.
Family and single memberships
available.
Season: May 30 through Labor Day

SPRINGFIELD ACADEMY OF MEDICINE



OFFICERS

1968-1969

<i>President</i>	CARROLL BRYANT, M.D.
<i>President-Elect</i>	BERNARD N. GILCHRIEST, M.D.
<i>Vice-President</i>	VICTOR PANITCH, M.D.
<i>Secretary</i>	CHARLES ATAMIAN, M.D.
<i>Treasurer</i>	RAYMOND GELFMAN, M.D.

BOARD OF DIRECTORS

JOHN FLAHIVE, M.D.	1969		MENDEL MAZER, M.D.
OMAR T. PACE, M.D.	1970		BERNARD BLOOM, M.D.
JOHN J. MALONEY, M.D.	1971		LEROY KENDREW, M.D.
CYRIL E. SHEA, JR., M.D.	1972		ALOYSIUS A. BLONIAZ, M.D.
JAMES D. FISHER, M.D.	1973		ALAN PECK, M.D.

BOARD OF CENSORS

WALTER J. J. NERO, M.D., CHAIRMAN	1969	EDWARD J. MANWELL, M.D.	1971
ALAN M. ASHE, M.D., SECRETARY	1970	BRUCE B. ALICANDRI, M.D.	1972
RICHARD J. MAHER, M.D.	1973		

THE NEXT MEETING OF THE SPRINGFIELD ACADEMY OF MEDICINE

will be held on

TUESDAY, SEPTEMBER 10, 1968 at 8:30 P.M.

SPEAKER:	Alan F. Guttmacher, M.D. President, Planned Parenthood-World Population New York, N. Y.
TOPIC:	"CONCEPTION CONTROL, SOCIAL AND MEDICAL ASPECTS"
CLINIC:	Wesson Maternity, 5:00 P.M.

"NOBODY'S AGAINST IT, BUT . . ."

The history of the currently much discussed Heart, Cancer, and Stroke Programs or the Regional Medical Programs, as it is called by those closely connected therewith, is rather baroque. It began with the appointment of the DeBakey Commission on Heart disease, Cancer, and Stroke in March, 1964. This Commission rendered in December, 1964, a report which, while wordy and far-reaching, did propose some positive approaches. However, the legislation drafted on its basis was very different from the Commission's recommendations. Unlike the report of the DeBakey Commission, which recommended a national network of medical centers; the Heart disease, Cancer, and Stroke Amendments of 1965 (PL 89-239) instead purport to establish regional cooperative arrangements among science, education, and service resources "... for research and training (including continuing education) and for related demonstrations of patient care in the fields of heart disease, cancer, stroke, and related diseases . . ." This law is supposed to focus on the cooperative involvement of university medical centers, hospitals, practicing physicians, other health professions, and voluntary and official health agencies in "seeking new ways to build effective linkages between the development of new knowledge and its applications to the problems of patients." Moreover, it is claimed that "the law is highly flexible and emphasizes the exercise of initiative and responsibility at the regional level in identifying problems and op-

portunities in seeking these objectives and in developing specific action steps to overcome the problems and exploit the opportunities." To get the show on the road, 35 million dollars were appropriated for this program.

IMPLEMENTATION

Recently a physician—congressman, namely, Dr. Durward G. Hall, Republican from Missouri, said "nobody's against it . . . but not everybody's for it." Many hope that the RMP will be a success but congratulations are not in order as yet. There are various challenges to the concept stemming basically from the vagueness of the legislation as it is written and to the lack of ideas as to how the legislative objectives are to be attained. There is much articulation, much reading into the law, and much scrambling to get into the act. Some are undertaking the organization of an RMP on the basis of: "If we don't get the money, someone else will." Similarly, some are acting on the premise of: "If we don't do the planning, someone else will." Some are applying for planning grants even though they presently have no good ideas but hope that the money will stimulate creativeness. Others are hiring or seeking to hire an imaginative staff to do the planning for them somehow hoping that hired "pros" will produce ideas. Others are rationally trying to formulate ideas before applying for money—a strange behavior in this age of get the money first and the ideas later.

Most of the population of the coun-

CARROLL TRAVEL BUREAU INC.

**Johnson's Bookstore Building
1383 Main St. — Springfield, Mass.
739-7391**

A Complete Experienced Travel Service

Luncheons — Dinners — Cocktails

WILLOW GLEN HOUSE

**East Longmeadow, Mass.
232 No. Main St. — Tel. 525-2167**

try has or soon will be covered by way of planning grants to regional agencies. The major types of activity involved in planning grants have included: (1) the development of planning resources; (2) the development of a program of studies for the accumulation of basic data concerning resources, needs, and wants in the area; (3) the development of an environment of cooperation through the establishment of communications, liaison, and interrelationships; and (4) the undertaking of some action trials. Although grants may be made for planning alone, the purpose of the program is action related to accessibility of improved patient care. Awards may be made for operations on a phased basis, concurrent with the planning activity.

Thus far, the emphasis appears to be on continuing education with many regions planning programs for both physicians and paramedical personnel. The intent is to draw heavily upon the resources of medical centers for the conduct of various training sessions. Arrangements are being made to es-

tablish two-way radio, television, and xerography communication with medical centers to facilitate consultation, discussions, and seminars. Visiting consultants to conduct programs at small community hospitals as well as community physicians going to medical centers for periodic refresher courses are being contemplated. Self training audio-visual centers to supplement periodic seminars are being planned in many hospitals.

THE MEDICAL CARE AND EDUCATION FOUNDATION

The three-state RMP of Mass., New Hampshire and Rhode Island, incorporated as The Medical Care and Education Foundation, received Federal approval in January of 1968 and a grant of \$397,647 for the year. The program is now in its organizational phase. Leona M. Baumgartner, M.D., has been appointed Executive Director with Osler Peterson, M.D., Associate Director in charge of data collection and processing. Norman Stearns, M.D., has contributed a great deal in the beginnings of this organ-

TREND REALTY CORP.

MULTIPLE LISTING SERVICE

RESIDENTIAL / COMMERCIAL

ELECTRONIC HOME SELECTION

call Mrs. Matthew J. Bachulus — 567-3956 or 567-8931

Buckley's Pharmacy

Robert W. Dobek, B.S., Reg. Pharmacist

24 HOUR EMERGENCY PRESCRIPTION SERVICE

Prescriptions Delivered

2 NORTH MAIN STREET — EAST LONGMEADOW, MASS.

Call Anytime 525-3357

ization as the Acting Director. There is talk of 5 regional offices being established with one each in New Hampshire and Rhode and 3 in Mass. Moreover, thought is being given to the establishment of 3 Mass. regional offices as part of the appropriate area-wide comprehensive health planning councils of the state so as to reduce duplication of effort, reporting, and decision-making.

The MCEF intends to become a funding mechanism for the purpose of assisting projects and program dealing with heart disease, cancer, stroke, and related diseases. A physician, a group of physicians, an institution, or some other organization needing financial aid in developing or operating a program related to these health problems could apply for funds. The MCEF has not as yet funded any projects, but at least 3 are currently under consideration.

MONEY BAIT

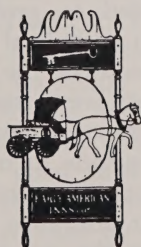
Before being carried away with

commitments on planning legislation, a hard, cold look should be taken at the price as compared to potential advantages and results. No one can be against improving health services; however, with the many and varied planning programs being implemented with Federal stimulus and financing, the situation is getting pretty complex and confusing. Just because money is spent does not mean that positive results will accrue. Let us beware of creating expensive bureaucracies with employees willing to defend their jobs to the last under the guise of solving urgent social problems; same is unattackable because of its seeming idealism. Moreover, let us beware of the potential encroachment on the practice of medicine by citizen's committees composed representatives from highly varied sectors of society. Such committees, especially when they have money, and power, along with aggressiveness and vested interest, can become something formidable to deal with. Ayres

HAFEY FUNERAL SERVICE

494 BELMONT AVENUE — SPRINGFIELD, MASS.

Traditional
**New
England
Hospitality**



YANKEE PEDLAR INN

B. Noel Harrington, Innkeeper
Rt. 5 at 202 Holyoke, Mass.
Phone: 532-9494

PERRENE'S UNIFORMS, INC.

Representing the Finest National Brands for the Medical Profession.

Doctors' Consultation Coats
Lab. Coats — Lab. Aprons
Nurses' Uniforms & Accessories
Nurses' Shoes & Caps

924 Main St., Corner William

Hours 9:30 to 5:30 P.M.
Monday & Thursdays, to 9 P.M.

CROTTY DRUG STORE

78 Elm Street — Westfield, Mass.

562-2644

OVER HALF A CENTURY

SERVING WESTFIELD PEOPLE

Henderson's Funeral Home

AMERICA'S LARGEST TRAVEL ORGANIZATION



World-Wide Travel Agency

110 Fort Pleasant Ave.; off Sumner Avenue

DIAL 785-1381

"AAA, the most trusted name in travel."



Dine in Relaxed Elegance

Always a different and delicious menu to enjoy in pleasant comfort. Serving daily from eleven-thirty AM to midnight.

THE LOG CABIN

Easthampton Road, Route 141

**HOLYOKE
539-9137**

MALPRACTICE

Defense of law suits for malpractice has been provided active Fellows of the Massachusetts Medical Society since 1908, according to Burrage's "History of the Massachusetts Medical Society" as quoted in the report of the Committee on Professional Liability. The president and secretary of the Society determined which cases were to be defended or rejected, and the Fellows agreed not to settle a claim without the consent of the Society. While defense costs have been borne by the Society, payment of damages, if any, have not been considered the responsibility of the Society. In fact, if a physician settled a claim without the consent of the Society, he was expected to reimburse the Society for expenses incurred in his legal defense.

Guidelines for review of malpractice suits were adopted by the Committee on Professional Liability on November 14, 1962, in which the Committee indicated that legal defense at the expense of the Society was intended for Fellows without malpractice insurance. Furthermore, it was stated that the Medical Defense Act was not intended to provide defense lawyers with additional legal assistance at the expense of the Society. These statements were made necessary because insurance companies often advised physicians to obtain additional legal assistance when law suits exceeded their insurance coverage.

At the present time, most physicians carry malpractice insurance. This has been made necessary by the tremendous increase in malpractice suits. The AMA Legal Department's

INSURANCE

studies showed that in 1956, 14.1% of all doctors had been accused of malpractice, and that this figure had risen to 17.8% in 1963. Furthermore, jury awards have skyrocketed. It has been estimated that the median jury award was \$22,500 in 1961, and will probably be \$28,000 this year. These are median figures, but the high point in 1961 was \$138,000 and now stands at \$700,000. Obviously, we all need insurance, but the most vulnerably group includes anesthesiologists, neurosurgeons, obstetricians, gynecologists, orthopedists, and surgeons including otolaryngologists who do plastic surgery. Here in Hampden District, Fellows may readily protect themselves at minimum cost with the group "umbrella policy" described in the *Hippocrat* (April, 1968, page 23) whereby protection up to \$1,000,000 or more is available including legal defense coverage if such coverage is not provided by the basic policy.

If most of our members are covered by their own malpractice insurance, the Committee on Professional Liability questions the need for the Medical Defense Act. The Committee reports that requests for medical defense by fellows who carry no professional liability insurance are infrequent. Furthermore, if requests for additional legal defense for suits exceeding the coverage were granted, the Society would face a serious financial problem. Moreover, there is a good deal of doubt that such additional legal assistance to that already provided by the insurance company serves any useful purpose. The Committee quotes the local chief adjuster for the insurance

company insuring the largest number of our members as saying "Our protection is unlimited, irrespective of the amount asked for in a suit. Our obligation to defend remains the same." He also added that he hoped physicians would not have additional counsel if sued above covered limits.

The tax aspect has also been injected into the problem. In its report, the Committee quotes Bernard D. Hirsh, L.L.B., Director of the Law Division of the AMA, as saying: "Most bar associations regard the practice of an association in furnishing defense counsel to represent individual members in their private litigation as constituting the 'corporate practice' of law . . . I might also add that the Internal Revenue Service looks upon this practice as an improper activity of a tax exempt organization." He added that the National Chiropractic Association lost its exemption because of extensive defense work in behalf of its members.

The Committee feels that in view of the increased number of medical malpractice suits and the large verdicts that are being awarded, every practicing physician should be protected by professional liability insurance. Since the possibility exists that providing legal counsel may be the corporate practice of law, the Committee has recommended that the Medical Defense Act be repealed. The Executive Committee of the MMS has approved this recommendation, and the Council has also approved this recommendation at its meeting of May 20, 1968.

Tillman

EXECUTIVE COMMITTEE MEETING

HIGHLIGHTS

The May meeting of the Executive Committee was held on May 14 in the Society's conference room. Dr. Baker called the meeting to order at 7:45 P.M. Present were: Drs. Baker, Griffin, Stoler, Nero, Wiedman, Barnes, Moore, Hayes, Mozden and Mrs. Purdy.

The minutes of the April meeting were read and accepted without correction.

A letter from Dr. Blasingame of the AMA recommending the establishment of a nurse recognition day was read. The Committee felt that this should be referred to Dr. Montori, Chairman of the Woman's Auxiliary Committee, to initiate a dialogue with the latter relative to a possible tie-in of such a recognition day for nurses with the "White Cap Ball," the purpose of which is to raise funds for nursing scholarships. The Committee will appoint additional members to work with Dr. Montori if he requests same.

A letter from the Visiting Nurses Association was read detailing some of the financial problems which this group is facing and asking for suggestions as to how this problem might be overcome. It was the belief of this Committee that significant savings might be accomplished by curtailing some of the visiting nurses' unsolicited services, such as health teaching, for which there are no payments, at least for the time being or until additional funds are forthcoming.

Mrs. Purdy gave her office report. Meetings held at the Society's offices since the last Executive Committee meeting were: Public Health, Pre-Council, Disaster Medical Care, Censor, and Mental Health. The response

to the plea for writing to your State Senator concerning H-4395 was excellent, and the members are to be commended.

Dr. John Turner's reply to the AMA on Community Services was read to the Committee. Dr. Turner wrote this letter in response to a request from this Committee as a reply to a letter from Miss Sandra Dietl, Staff Associate of the AMA. This letter was received as informational. It was Dr. Turner's recommendation that HDMS "repeat and emphasize its willingness and desire to participate in continuing functions of the Springfield Area Health Study and action study project." In line with his recommendation Dr. Barnes has agreed to contact the planning groups and assure them of our interest and help.

Dr. Boivin was approved by the Executive Committee as Assistant Secretary of the Society and will assume the duties of his office at the next meeting.

It was voted that Mrs. Purdy send out notifications of all the HDMS and Executive Committee meetings to various health agencies and hospitals to prevent conflicts between agency meetings and medical meetings.

It was voted to write a letter of recognition to Mr. Bud Clain of WSPR for his excellent services to HDMS over the last several years.

Dr. Hayes reported a rumor to the effect that the Connecticut General Insurance Company was planning to renegotiate its health and accident policy with the United Aircraft Co. and the Hamilton Standard Co. This renegotiation is long overdue from the physicians' standpoint of view since this is one of the few health and acci-

dent policies that will not assign insurance benefits to the physician. The Executive Committee felt that this was a good time to go on record as opposed to non assignment of benefits, and that this matter be referred to Dr. Joseph Kelly, Chairman of the Insurance, Labor Relations & Industrial Accidents Committee, for investigation and possible action. Perhaps, joint action with the Hartford County Medical Association might be possible.

A letter from Mrs. Margaret H. Melinger was read to the Committee requesting information on dyslexia or perceptual handicaps as well as the Parkside School and its directors. The

Committee felt it did not have sufficient information in regard thereto and referred the letter to the Mental Health Committee for consideration at its June meeting.

The meeting of the Executive Committee adjourned at 10 P.M. and the committee reconvened as the Grievance Committee. Two grievances were heard and appropriate letters were written.

The meeting adjourned at 10:30 P.M. following a vote of thanks to Dr. John Griffin, the retiring Secretary of the Society for exemplary service to the Society over the past two years.

MARK YOUR CALENDAR NOW!

HDMS MEETING, SEPT. 24

HDMS EXECUTIVE COMMITTEE MEETINGS, SEPT. 17 AND OCT. 15

MMS COUNCIL MEETING, BOSTON, OCT. 9

AMERICAN ACADEMY OF GENERAL PRACTICE, LAS VEGAS, SEPT. 16-19

AMERICAN COLLEGE OF SURGEONS, ATLANTIC CITY, OCT. 14-18

AMERICAN SOCIETY OF ANESTHESIOLOGISTS, WASHINGTON, D.C., OCT. 19-23

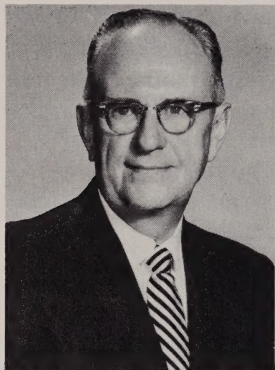
AMERICAN ACADEMY OF PEDIATRICS, CHICAGO, OCT. 19-24

AMERICAN COLLEGE OF GASTROENTEROLOGY, BOSTON, OCT. 27-30

AMERICAN ACADEMY OF OPHTHALMOLOGY AND OTOLARYNGOLOGY, CHICAGO, OCT. 27-NOV. 1

AMA CLINICAL MEETING, MIAMI BEACH, DEC. 1-4

Speak Up!



On other pages you will observe that this issue of the *Hippocrat* is dedicated to the Massachusetts Medical Society.

Medicine in this State has had an impressive history of accomplishment and the recently concluded 187th Anniversary Meeting in Boston demonstrated the enlightened vigor of our organization with an outstanding program, carefully planned and presented. The scientific and industrial exhibits were excellent and added much to the meeting. I am sure that those able to attend found the time spent, most worthwhile.

To some, the Annual Meeting was the highlight of the session and demonstrated that controversial matters could be settled smoothly and with dignity in true democratic fashion.

After attending the meeting, I left with the realization that we are well represented by our councilors. We elect and charge them with the responsibility of acting for us. Lines of communication must be kept open if they are to represent us fully by knowing our desires and wishes. We should all know and understand our councilors—keep them informed.

So speak up and let your voice be heard.

A handwritten signature in dark ink, appearing to read "W C Barnes".

WAYNE C. BARNES, M.D.

Erratum: The signature of Dr. Wayne C. Barnes at the bottom of page 3 in the May, 1968, issue of the *Hippocrat* should have been at the conclusion of his "Inaugural Address" on page 14.

GOLD CROSS

AMBULANCE • OXYGEN • SURGICAL

781-3781



*7 Cadillac Ambulances • 3 Locations
Springfield • Westfield • Northampton*

**MEDICARE APPROVED for Ambulance —
Inhalation Therapy — Rentals — Sales.
WE WILL BILL MEDICARE DIRECTLY
ON ALL COVERED SERVICES.**



BIRD
IPPB
MARK 7

INHALATION THERAPY DEPARTMENT

INTERMITTENT POSITIVE PRESSURE
BREATHING THERAPY OXYGEN SETUPS •
SUCTION UNITS • AEROSOL THERAPY

Our Salesmen and Technicians will visit upon request any Doctor, Hospital or Nursing Home patient to detail and instruct in any phase of inhalation therapy — Demonstrations of our units also available without obligation.

"EXCLUSIVE DEALERS FOR "BIRD" — RESPIRATORS"



BLUE SHIELD A CORPORATE ENTITY

The Blue Shield Board of Directors is composed of eighteen members. The law presently requires that a majority of directors at all times be persons approved in writing by a medical society incorporated in the Commonwealth not less than ten years and having no less than two thousand registered physicians as members, and the Blue Shield by-laws as approved by the Commissioner of Insurance require that at least one-third of the directors be physicians registered to practice medicine in the Commonwealth of Massachusetts and engaged in the active practice of medicine in the Commonwealth.

Until recently the following format was adhered to in respect to the selection of physician directors:

1. One surgeon from the Boston metropolitan area and one surgeon from outside the Boston metropolitan area.

2. One internist from the Boston metropolitan area and one internist from outside the Boston metropolitan area.

3. One general practitioner from outside the Boston metropolitan area.

4. One representative of radiology or anesthesiology.

Currently there are seven physicians on the Board of Directors:

1. Two surgeons from the Boston metropolitan area; one from outside the Boston metropolitan area.

2. No internist from the Boston metropolitan area; two internists from outside the Boston metropolitan area.

3. One general practitioner from the Boston metropolitan area.

4. One representative of anesthesiology.

In respect to the selection of non-physician directors, the following factors are taken into consideration:

1. Geographic location. For this purpose the Commonwealth is divided roughly into five areas—metropolitan Boston, the North Shore, the South Shore, central Massachusetts and western Massachusetts.

2. Occupation. Because of the nature of its business, Blue Shield should have on its Board of Directors persons conversant with banking, business management and the attitudes of labor, management, the general public and its governmental representatives.

3. Community standing. It goes without saying that members of the Blue Shield Board of Directors must be well thought of in their own residential and business communities.

4. Availability. Members of the Blue Shield Board of Directors must be willing and able to attend meeting of the Board as well as meetings of the committees of the Board.

In order to assure a continuing roster of acceptable candidates for both the Blue Cross and Blue Shield Boards of Directors, the Blue Cross-Blue Shield Branch Office Managers are encouraged to submit periodically the names of persons in their territories who meet the above qualifications. It is mainly from these lists of names that future directors for both Blue Cross and Blue Shield are obtained although committee members may and do supply the names of other candidates.

The term of membership on the Blue Shield Board is three years and re-election is permitted. Terms are staggered so that the terms of one-third of the members expire each year.

All board members serve without compensation and this includes the President and other officers of the Corporation.

Under corporation law, all powers

of management are vested in the Board of Directors, except those powers expressly reserved to the voting members (Members of the Executive Committee of the Council of The Massachusetts Medical Society). In general, these reserved powers are:

a. The power to elect and, under certain circumstances, to remove the directors.

b. The power to amend or modify the corporate charter or by-laws.

c. The right to approve or disapprove any sale of all or substantially all of the Corporate assets or any proposal to merge or consolidate with another Corporation, and

d. The power to dissolve and liquidate.

In respect to Blue Shield, however, the Voting Members also have reserved the right to approve or disapprove rules and regulations of the Corporation relating to the medical aspects of the following:

a. The standards of medical care to be furnished subscribers and covered dependents.

b. The extent and classification of medical benefits to be furnished subscribers and covered dependents.

c. The determination of income levels below which subscribers and covered dependents shall be classified as service-benefit members. (In this case the Council of The Massachusetts Medical Society is given prior right to approve or disapprove.)

d. The compensation fee schedule to be paid participating physicians and participating dentists, and

e. The admission, suspension and discipline of participating physicians and participating dentists.

All other corporate powers are lodged in the Board of Directors. These powers include management of the corporate business, election and removal of officers, the determination of subscription charges, determination

of investment of current funds, and in general all of the policy decisions that must be made in the operation of a prepaid medical care plan.

Under the law Blue Cross and Blue Shield may contract with each other for the joint or co-operative administration of their affairs and this they have done for years with remarkable success.

Under the present Blue Cross-Blue Shield Joint Operating Agreement Blue Shield has responsibility for all activities relating to public relations, enrollment and underwriting for both Corporations. In addition, it has exclusive control over all matters which are solely related to its operations and activities, including physicians' relations and the processing and payment of claims. Blue Cross is responsible for all other services and has exclusive control over all matters which are solely related to its operation and activities, including hospital relations. In other words, Blue Shield has control over its own activities as well as responsibility for what might be called the external operations of both organizations while Blue Cross has control over its own activities as well as responsibility for what might be called the internal operations of both organizations.

Although the Boards seldom meet jointly, there is close liaison between the two because of the fact that committees of the Board having to do with matters of common concern meet jointly.

All expenses arising from the separate and individual operations of Blue Shield are charged to Blue Shield and the same is true of Blue Cross. All other expenses are prorated monthly between Blue Cross and Blue Shield in proportion to the number of basic contracts of each in effect on the last business day of each calendar

Continued on page 29

CORRESPONDENCE

DIALOGUE WITH THE AMA

To the Editor:

On April 24, I called Dr. Blasingame's attention to two items which appeared recently in the pages of *The Hampden Hippocrat*.

My reason for doing so is because these items carried suggestions for improvement in the effectiveness of medical societies—national, state, and local.

Dr. Blasingame's reply was so informative and responsive as to warrant, I believe, publication in our bulletin.

Our exchange of correspondence follows:

"Dear Dr. Blasingame:

I recall with pleasure meeting you on December 6, 1966, when you addressed The Hampden District Medical Society.

In response to your suggestion at that meeting that ideas, informed criticism, and aspirations be brought to the attention of the AMA's Board of Trustees through your office, I'm submitting:

(1) That the AMA, in addition to meeting attendance, establish new guidelines for measuring the effectiveness of county or district societies.

(2) That the AMA assist and guide local societies in the publication and financing of medical bulletins. An appropriate brochure might prove very helpful.

(3) That communication between local societies and their parent organizations be improved in as many other ways as possible (see "Room at the Top," *Hippocrat*, May 1967).

My reasons for the above suggestions are fully described, I believe, in the April issue of *The Hampden Hippocrat*, April, 1968 ("In Defence of Grass Roots") a copy of which is enclosed.

The above suggestions were brought to the attention also of our Delegate to the AMA, Dr. Donald R. Hayes.

With kindest regards,

Max Millman, M.D."
Springfield

Dr. Blasingame's reply follows:

May 1, 1968

"Dear Doctor Millman:

Your April 24 letter and enclosures reached me April 30, and I appreciate your writing. I have the material, and I shall see that your suggestions are carefully studied.

As you may know, a resolution from Kentucky was approved at the Houston Convention calling for additional study of the County Medical Society problems and programs by the American Medical Association. Considerable work has already been done, and a meeting on this subject area will likely be held in Chicago in August in connection with the Public Relations Institute.

The Report of the Board of Trustees on County Medical Societies may have had some unfortunate wording. The intent was to stress the importance of the County Medical Society and to point up the need for more attention to this basic, grass-root organization. I certainly agree that attendance is only one yardstick to measure success. Participation in active committees by the members is all-important. Your local group is an excellent example, and every commendation is deserved.

Cordially,

F. J. L. Blasingame, M.D.

Executive Vice President, AMA"

Dr. Blasingame was kind enough to forward a copy of his letter to Dr. Donald R. Hayes and to our Executive Secretary, Mrs. Vivian M. Purdy.

Millman

HAMPDEN CAPSULES

SPEAKING

Dr. Wyker, from Palmer spoke on "Beatitudes for Parents" at the Annual Meeting of the Childbirth Education Association.

Dr. Francis Riles at Sacred Heart School with "Quarter Million Teenagers," "Innocent Party," and "Parents to Child about Sex."

Dr. Zadworny at St. Joseph's School, Chicopee, with "Parents to Child about Sex."

Dr. Kendrew at the North End Community Center with "Parents to Child About Sex."

Dr. Galuszka to the Lambert Lavoie School in Chicopee.

The new film, "Parents to Child About Sex," has travelled to Northampton and to Brimfield for use.

"Diabetes, Its Symptoms and Complication" was the topic of the talk that Dr. Cassella gave to the Feeding Hills Grange.

Dr. Siragusa talked to Our Lady of

Hope Guild for the American Cancer Society with "Time and Two Women."

Dr. Hough, III, spoke at a luncheon of the West Springfield Rotary Club on "Prolongation of Life."

OFFICES

Dr. Orlansky elected President of the Western Massachusetts Psychiatric Society for 1968.

Dr. Michael Greene reelected Secretary for the Western New England Psychoanalytic Society.

Dr. Quinn was co-chairman of the Annual Lions Club Carnival in East Longmeadow.

Dr. Henry Polchlopek was elected President of the Western Chapter of the Massachusetts Heart Association.

MOVING

Dr. Joel B. Bettigole from 91 School St., Springfield, to 52 Mulberry Street.

Dr. John J. Zadworny from 140 Chestnut St., Springfield to 52 Mulberry Street.

OFFICE FOR RENT

Forest Park Medical Center

302 Sumner Avenue

Springfield, Mass.

737-3733

BLUE SHIELD

Continued from page 27

month, except that expenses of owning and operating the Blue Cross-Blue Shield building are shared equally.

Because Blue Shield and Blue Cross operate under special enactments of the legislature, are exempt from state and local taxes, involve more than half of the people of the Commonwealth, and pay physicians, dentists and hospitals many millions of dollars per year, the directors of these organizations must be dedicated persons capable of evaluating and, if necessary, reconciling the respective legitimate interests of physicians, dentists, hospitals, and members of the general public.

LIST OF ADVERTISERS

Below is a list of our advertisers for 1968.
In your contacts please tell these people how much we appreciate their support.

AAA

Betty's Old Towne House
Buckley's Pharmacy
Lester L. Burdick, Inc.
Byron's Funeral Home, Inc.
Carroll Travel Bureau
Corliss Adjustment Bureau, Inc.
Credit Bureau, Inc.
Crotty Drug Store
Curran-Jones, Inc., Funeral Home
Dale Bros. Laundry
Dickinson-Streeter Co., Funeral Home
Du Pont
East Longmeadow Nursing Home, Inc.
Field, Eddy & Bulkley
Financial Management Institute
Flittner Drug Corp.
Footit Surgical Supplies
Gold Cross Ambulance & Oxygen Service
Hafey's Funeral Service
Harris Pharmacy
Henderson Funeral Home
Highpoint Motor Inn
Investors Div. Serv.—E. Margolis, Mgr.
Jaycox Restaurant
King's Drug Store
James W. Knight, Financial Planning
Landen-True, Jewelers

Lederle Laboratories
Lilly, Eli and Co.
Log Cabin Restaurant
Mall Drugs
McCarthy Funeral Home
Merit Pharmacal Co.
Metropolitan Life Insurance Co.
Oaks Banquet House
O'Donnell, Edward F. Funeral Home, Inc.
Old Storowtown Tavern
Orchard Manor Rest Home
Perrene's Ltd.
Peter Pan Tours
Pomeroy-Williams Co.
Professional Pharmacy
Ratell Funeral Home
Reid, A. R., Inc.
Safe Deposit Bank and Trust Co.
Sampson, T. P., Funeral Home
Schlatter's Flowers
Shaker Farms
Smith, Kleine & French Laboratories
Spring Street Drug, Inc.
Spruce Manor Nursing Home
Stuart Company, The
Student Prince Restaurant
Third National Bank of Hampden County
Weidner Travel Bureau, Inc.
Western Massachusetts Electric Co.
Willow Glen House
Winthrop Laboratories
W. F. Young, Inc.
Yankee Pedlar

PROFESSIONAL PHARMACY

"In The MEDICAL CENTER"

130 MAPLE STREET
SPRINGFIELD, MASS.

TELEPHONE

736-1859 — 736-1850

**PRESCRIPTIONS FILLED
WHILE YOU WAIT
... OR ...**

**FREE DELIVERY
IN GREATER SPRINGFIELD**

Hours Daily 8 A.M. - 9 P.M.
SUNDAY 10-1

David R. Smith
Reg. Pharmacist

Ernest A. Byron
SPRINGFIELD

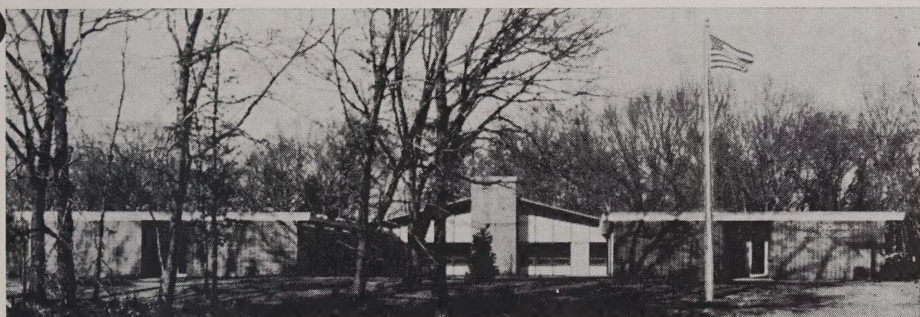
OAKS BANQUET HOUSE

Boston Road at Parker Street

**PARTIES AND BANQUETS
FROM 10 TO 1,000**

Tel. 543-3127

The opinions expressed in *The Hippocrat* do not necessarily represent the official viewpoint of the Hampden District Medical Society.



EAST LONGMEADOW NURSING HOME

Ultramodern, resortlike, convalescent and nursing home overlooking Franconia Golf Course.

All new staff of Registered Nurses — several times latest state requirements.

Spacious living room, dining room, country grounds for that great to be alive feeling.

More for some, less for others.



Pathibamate® 400

Tridihexethyl chloride 25 mg.

Meprobamate 400 mg.



Pathibamate® 200

Tridihexethyl chloride 25 mg.

Meprobamate 200 mg.

This Third National service can help you!

Many busy medical men in Hampden County find our Trust Department a great help. We relieve them of the management details of their securities and other investments. Under an Agency Agreement the Third National safeguards the securities and other investments. IBM computer accounting keeps every account up-to-date and provides the customer with an excellent record of his investments. In addition, the investment officers review and make recommendations on each Agency Account.

Why not let us do the same for you? Ask our Trust Officers to help outline a basic plan. You and your attorney work out the exact details. Remember, an Agency Account can always be revised to meet changed conditions. We invite you to call for an appointment today.

Third National

Bank of
Hampden County

For Trust Department service come to the Main Office:
1391 Main Street, Springfield or call REpublic 3-1141

MEMBER FEDERAL DEPOSIT INSURANCE CORPORATION

CLOSED SUNDAYS

HOSPITALITY
UNLIMITED

736-8521



AIR CONDITIONED

JAYCOX

RESTAURANT

456 Sumner Avenue
Springfield

DOCTOR!

OUR COLLECTION SERVICE IS THE RIGHT
PRESCRIPTION
FOR YOUR DELINQUENT ACCOUNTS

we have served "The Business Side of Medicine" for 25 years

CORLISS ADJUSTMENT BUREAU, Inc.

293 Bridge Street Springfield, Mass. 01103

call our Medical Division, 739-7346

